PAGE 1 / 24

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOKINI SX	For Other Than An Aut	norized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
AMERICAN WORKIN	G FAMILIES		
ADDRESS (number and street)	107 SOUTH WEST STREE	T #527	
Check if different			
than previously reported. (ACC)	ALEXANDRIA		VA 22314 –
2. FEC IDENTIFICATION N	UMBER ▼ CIT	ГУ▲	STATE ▲ ZIP CODE ▲
C C00511915		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Mar	² 20 (M3) Jun 20 (M	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7	Oct 20 (M10) Jan 31 (YE)
Quarterly Report (0	(C) 12-Day	rimary (12P)	General (12G) Runoff (12R)
Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (0		M M / D D	/ Y Y Y Y in the
Year-End Report (\) July 31 Mid-Year		on on 09 01	2020 State of MA
Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	t Election	on on	in the State of
5. Covering Period 0	7 01 / 2020	through 08	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the		my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	Jackson, Bud, , , er		
Signature of Treasurer	cson, Bud, , ,	[Electronically Filed]	Date 08 / 20 / 2020
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signin	g this Report to the penalties of 52 U.S.C. § 30109
Office			FEC FORM 3X
Use Only			Rev. 05/2016

	O FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE F RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name		
A	AMERICAN WORKING FAMILIES		
Re	eport Covering the Period: From: 07	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	08 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2020		1382.47
	(b) Cash on Hand at Beginning of Reporting Period	2152.07	
	(c) Total Receipts (from Line 19)	430508.00	430518.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	432660.07	431900.47
7.	Total Disbursements (from Line 31)	376103.68	375344.08
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56556.39	56556.39
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	This committee has qualified as a multican	didate committee. (see FEC FORM 1M)	
	F	or further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN WORKING FAMILIES

Report Covering the Period: From: 07	01 2020	To: 08 12 2020
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	120500.00	120500.00
		1000
(ii) Unitemized	8.00	18.00
(iii) TOTAL (add	120508.00	120518.00
Lines 11(a)(i) and (ii)▶	120508.00	120010.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	4 4	42 42
(such as PACs)	310000.00	310000.00
(d) Total Contributions (add Lines	4	47 47 48
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	430508.00	430518.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
_		
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	75 75 75	7 7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made	4 4	4 4
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
,, <u></u> , , , , , , , , , , , , , , , , , ,		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	430508.00	430518.0
. Total Federal Receipts (subtract Line 18(c) from Line 19)	430508.00	430518.00
(Subtract Line To(c) HOIR Line 19)	430300.00	430318.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo I ollou	Calendal Teal-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures(c) Total Operating Expenditures	60653.68	59894.08
(add 21(a)(i), (a)(ii), and (b))▶	60653.68	59894.08
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4	4 4 4
and Other Political Committees	4000.00	4000.00
(use Schedule E)	311450.00	311450.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
	4 4	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
Than I shadar ssimilaces	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(20) (a) Allocated Federal Election Activity))	
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	4 4 4	1 1 1 1 1 1 1 1 1
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	376103.68	375344.08
Total Federal Disbursements	, , , , , , , , , , , , , , , , , , , ,	
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	376103.68	375344.08

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	430508.00	430518.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	430508.00	430518.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	60653.68	59894.08
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	60653.68	59894.08

Use separate schedule(s) for each category of the Detailed Summary Page

FO	:	PAGE	6	OF	24			
(ch	eck only							
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13 14				15	16		17	

	Statements may not be sold or used by any per name and address of any political committee	
NAME OF COMMITTEE (In Full) AMERICAN WORKING FAMIL	LIES	
Full Name of Individual (Last, First, Middle In Caine, Daniel, , , Mailing Address 40 Littlefield Rd City Newton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Family Law Software Receipt For: Primary General Other (specify)	State Zip Code MA 02459 C Occupation (for Individual) Software Developer Aggregate Year-to-Date 1500.00	Date of Receipt 07 31 2020 Transaction ID : SA11AI.4816 Amount of Each Receipt this Period 1500.00 Memo Item
Full Name of Individual (Last, First, Middle Ir Cohen, Jacob, , , Mailing Address 38480 Flanders Drive City Solon FEC ID number of contributing federal political committee. Name of Employer (for Individual) TeamHealth Receipt For: Primary General Other (specify)	State Zip Code OH 44139 C Occupation (for Individual) Physician Aggregate Year-to-Date 1500.00	Date of Receipt 08 11 2020 Transaction ID: SA11AI.4824 Amount of Each Receipt this Period 1500.00 Memo Item
Full Name of Individual (Last, First, Middle In Goldberg, Charles, , , Mailing Address 1675 Saratoga Lane City Glenview FEC ID number of contributing federal political committee. Name of Employer (for Individual) Waypoint Receipt For: Primary General Other (specify)	State Zip Code IL 60026 C Occupation (for Individual) Sales Aggregate Year-to-Date ▼	Date of Receipt 08 11 2020 Transaction ID: SA11AI.4826 Amount of Each Receipt this Period 1500.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	•	4500.00
TOTAL This Period (last page this line number	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) AMERICAN WORKING FAMI	LIES	
Full Name of Individual (Last, First, Middle JVA Campaigns	Initial) or Full Organization Name	Date of Receipt
Mailing Address 230 E Town St 3rd Floor		07 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4771
Columbus	OH 43215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item In-kind - Research
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name of Individual (Last, First, Middle Kraft , Josh, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 8 Beresford		08 03 2020
City	State Zip Code	
Chestnut	MA 02467	Transaction ID : SA11AI.4822 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer (for Individual) Boys and Girls Clubs of Boston	Occupation (for Individual) CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name of Individual (Last, First, Middle C. Manning, John P., , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 81 Beacon Street		08 05 2020
City	State Zip Code	Transaction ID : SA11AI.4790
Boston	MA 02108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000.00
Name of Employer (for Individual) Boston Capital	Occupation (for Individual) President	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	10000.00	
SUBTOTAL of Receipts This Page (optional).		16500.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:					PAGE	=	8	OF	24
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	13 14				15		16	;	17	

	nd Statements may not be sold or used by any pers g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) AMERICAN WORKING FAM	IILIES	
Full Name of Individual (Last, First, Middle Munoz, Donald, , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 51 Fairview Rd		07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4814
Weston	MA 02493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NuCana	CFO	_
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	1500.00	
Full Name of Individual (Last, First, Middle National Association of Government)		Date of Receipt
Mailing Address 159 Burgin Parkway		07 24 2020
City	State Zip Code	
Quincy	MA 02169	Transaction ID : SA11AI.4783 Amount of Each Receipt this Period
FEC ID number of contributing		o. Edul Hoodpt tills I Glidd
federal political committee.	C	25000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	25000.00	
Full Name of Individual (Last, First, Middle Painters Allied Trades DC #35		Date of Receipt
Mailing Address 25 Colgate Road		08 10 2020
City	State Zip Code	Transaction ID : SA11AI.4794
Roslindale	MA 02131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify)	10000.00	
SUBTOTAL of Receipts This Page (optional	1)	36500.00
	<u> </u>	
TOTAL THIS Period (last page this line num	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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ı		13 14					15		16	6	17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) AMERICAN WORKING FAMIL	IES	
Full Name of Individual (Last, First, Middle Ir Retired State, County and Municipal Er		Date of Receipt
Mailing Address 11 Beacon Street		07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4774
Boston	MA 02108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	
Full Name of Individual (Last, First, Middle Ir Sagan, Alex, , , Mailing Address 14 Hubgard Park Road	nitial) or Full Organization Name	Date of Receipt
	7.0	08 01 2020
City	State Zip Code MA 02138	Transaction ID : SA11AI.4818
Cambridge FEC ID number of contributing federal political committee.	C 02138	Amount of Each Receipt this Period
Name of Employer (for Individual) Self	Occupation (for Individual) Management Consultant	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name of Individual (Last, First, Middle Ir UBC NE Regional Council of Car		Date of Receipt
Mailing Address 750 Dorchester Ave Suite 3100 City	State Zip Code	07 16 2020 Transaction ID : SA11AI.4780
Dorchester	MA 02125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	50000.00	
SUBTOTAL of Receipts This Page (optional)	•	61500.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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(0	che	ck only	or	ne)						
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		13		14		15		16		17

	the name and address of any political committee	
NAME OF COMMITTEE (In Full) AMERICAN WORKING FAM	ILIES	
Full Name of Individual (Last, First, Middle Wolk, Jeffrey, , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 45 Woodland Road		08 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4820
Chestnut	MA 02467	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
The Cross Country Group	Executive	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1500.00	
Full Name of Individual (Last, First, Middle	l Initial) or Full Organization Name	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle	e Initial) or Full Organization Name	Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number	ber only)	120500.00

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 24 (check only one) 11a					
	y information copied from such Reports and Sta for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full) AMERICAN WORKING FAMILIE	≣S							
Α.	Full Name of Individual (Last, First, Middle Initi. AMERICAN SOCIETY OF ANESTHESIOLO	al) or Full C OGISTS PC	Organization Name DLITICAL ACTION COMMITTEE	Date of Receipt					
	Mailing Address 1061 AMERICAN LANE			07 28 2020					
	City	State	Zip Code	Transaction ID : SA11C.4787					
	SCHAUMBURG	IL	60173	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C CO	0255752	75000.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Receipt For:	Aggragata	Year-to-Date ▼	-					
	Primary General	Aggregate	Teal-to-Date ▼						
	Other (specify) ▼		75000.00						
	Full Name of Individual (Last, First, Middle Initi								
В.	D.R.I.V.E DEMOCRAT, REPUBLICAN, INDEPENDENT	VOTER EDUC	CATION (THE PAC OF THE INTERNATION	Date of Receipt					
	Mailing Address 25 LOUISIANA AVE., NW			08 10 / Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID : SA11C.4792					
	WASHINGTON	DC	20001	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0032979	25000.00					
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	7 1991 094110							
	Other (specify) ▼		25000.00						
C.	Full Name of Individual (Last, First, Middle Initi ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)	al) or Full C INTERNATION	Organization Name AL UNION OF OPERATING ENGINEERS	Date of Receipt					
	Mailing Address 1125 17TH ST, NW			07 27 2020					
	City	State	Zip Code	Transaction ID : SA11C.4786					
WASHINGTON			20036	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0029504	50000.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	.33. 03	 						
	Other (specify)	1	50000.00						

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

150000.00

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 OF 24 (check only one) 11a
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (IN FUII) AMERICAN WORKING FAMIL	IES		
Full Name of Individual (Last, First, Middle Ir A. LABORERS' INTERNATIONAL UNION			Date of Receipt
Mailing Address 905 16TH ST., N.W			07 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SA11C.4778 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0007922	100000.00
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 100000.00	
Full Name of Individual (Last, First, Middle Ir B. THE COUNCIL OF INSURANCE AGENTS & E			Date of Receipt
Mailing Address 701 PENNSYLVANIA AVENI SUITE 750			07 28 2020
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SA11C.4788 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0039578	10000.00
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 10000.00]
Full Name of Individual (Last, First, Middle Ir C. WORKING FOR WORKING AME			Date of Receipt
Mailing Address 6801 PLACID STREET			07 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAS VEGAS	State NV	Zip Code 89119	Transaction ID : SA11C.4782 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0490847	50000.00
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 50000.00]
SUBTOTAL of Receipts This Page (optional)			160000.00

TOTAL This Period (last page this line number only).....

310000.00

SCHEDULE B (FEC Form 3X)			FOR LIN	IE NUMBER	:	PAGE 13 OF 24				
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check o	·						
		Summary Page	X 21		23 28c	26 27 29 30b				
Any information coming from such Deposits and Otate		mat ha sald av								
Any information copied from such Reports and State or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
AMERICAN WORKING FAMILIES	3									
Full Name (Last, First, Middle Initial)										
A. ActBlue Technical Services				Date o	f Disburse					
Mailing Address 366 Summer Street				08	1:	2 2020				
City Somerville	State MA	Zip Code 02144		FEC Id	lentification	n Number				
Purpose of Disbursement	IVIA	02144								
Credit Card Processing Fees						ID 00010 1010				
Candidate Name			Category/			ID: SB21B.4812 Disbursement this Period				
			Type			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	ment For:				-	415.07				
Senate President	Primary Other (spe	General								
State: District:	Other (ope	Soliy) V		Me	emo Item					
Full Name (Last, First, Middle Initial)										
B. Bank of America				Date o	f Disburse	ement				
M 28 A 14				M = M		D / Y Y Y Y Y				
Mailing Address 600 North Washington Street				07 01 2020						
City Alexandria	State VA	Zip Code 22314		FEC Id	lentification	n Number				
Purpose of Disbursement	VA	22314			C					
Bank Charges					Transaction ID : SB21B.4767					
Candidate Name			Category/		Amount of Each Disbursement this Period					
Office Cought: House Bishurse			Type		15.00					
Office Sought: House Disburse Senate	Primary	nent For: Primary General			15.00					
President	Other (spe			П.,						
State: District:] , ,			I IME	emo Item					
Full Name (Last, First, Middle Initial)										
C. Bank of America				Date o	f Disburse					
Mailing Address 600 North Washington Street				07	/ D 0					
-	0									
City Alexandria	State VA	Zip Code 22314		FEC Id	lentification	n Number				
Purpose of Disbursement	77.	122011		С						
Bank Charges			L		ansaction	ID : SB21B.4769				
Candidate Name			Category/	Amoun	t of Each	Disbursement this Period				
Office Sought: House Disburse	ment For:		Туре			15.00				
Senate Disburse	Primary	General				.5.00				
President	Other (spe			I Mc	emo Item					
State: District:				IVIE	THO ILEIN					
						445.07				
SUBTOTAL of Disbursements This Page (optional).			······			445.07				
TOTAL This Period (last page this line number only	<i>'</i>)		_							

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SCHEDULE B (FEC Form 3X)	lles	wata achedule()	FOR LINE			PAGE 14 OF 24			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only		∃ 22] oe			
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angle AMERICAN WORKING FAMILIES									
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A. Bank of America				Date of D	isbursemei	nt			
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Purpose of Disbursement Bank Charges				C					
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Candidate Name						SB21B.4797			
Sandidate Name			Category/ Type	Amount of	Each Dis	bursement this Period			
Office Sought: House Disburser	nent For:		11.			30.00			
Senate	Primary	General							
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Α.	Bank of America				_	Date of	Disburs	emen		YYYY	7	
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	Candidate Name			Category/ Type	A	mount	of Each	Dist	ourseme	ent this Pe	riod	
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	Bank Charges					Transaction ID : SB21B.4799						
	Candidate Name		Category/ Type				Amount of Each Disbursement this Per					
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	President State: District:	Other (spec	шу)			Men	no Item					
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	Mailing Address 600 North Washington Street				┦[м м 07		17	/ Y	2020]	
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Candidate Name			Category/			: SB21B.4801 bursement this Period			
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Bank Charges				C					
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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) AMERICAN WORKING FAMILIES Full Name (Last, First, Middle Initial) JackSon Group Media, LLC Mailing Address 206 North Washington Street Suite 10 City Alexandria Primacy Category' Jype Office Sought: House President State: Disbursement Candidate Name Office Sought: House President State: Disbursement Category' Amount of Each Disbursement this Period Type Office Sought: House President State: Disbursement Category' Amount of Each Disbursement this Period Category' Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category' Amount of Each Disbursement this Period Category' Amount	TEMIZED DISBURSEMENTS		21b	22 🗶 23 🔲 26 🔲 27		
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A Jackson Group Media, LLC Mailing Address 206 North Washington Street Suite 10 City State Zip Code Alexandria VA Z2314 Purpose of Disbursement Candidate Name City State: District: Full Name (Last, First, Middle Initial) Mailing Address City State: District: City State Zip Code President John (specify) FEC Identification Number Category' Type Category' Type FEC Identification Number Category' Type Amount of Each Disbursement this Period Category' Type FEC Identification Number FEC Identification Number FEC Identification Number Category' Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period FEC Identification Number Category' Type Memo Item FEC Identification Number Category' Type FEC Identification Number Category Type FEC Id	, ,					
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City Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Memo Item FEC Identification Number Category/ Type Memount of Each Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Senate President Other (specify) Memo Item Substrict: Memo Item	Full Name (Last, First, Middle Initial) 3.					
Purpose of Disbursement Candidate Name Category/ Office Sought: House Disbursement For: Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Tech Usentincation Number Category/ Type Category/ Type Tech Usentincation Number Tech Disbursement this Period Tech Disbursement this Per	Mailing Address					
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State: District: Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Primary General Primary General Other (specify) State: District: Substate: District: Memo Item Memo Item Memo Item Amount of Each Disbursement this Period Amount of Each Disbursement this Period Memo Item 4000.00	Office Sought: House Disburser	nent For:	.,,,,			
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Mailing Address City		Caron (openity)		Memo Item		
City State Zip Code FEC Identification Number Category/ Type Office Sought: House Primary General President President Other (specify) ■ Memo Item Amount of Disbursements This Page (optional) Amount of Disbursement this Period Memo Item Amount of Disbursement this Period Memo Item Memo Item Amount of Disbursement this Page (optional) Amount of Disbursement this Period Memo Item Memo Item Amount of Disbursement this Page (optional) Amount of Disbursement this Period Memo Item Memo Item Amount of Disbursement this Page (optional) Amount of Disbursement this Page (optional) Memo Item Amount of Disbursement this Page (optional) Amount of Disbursement this Page (optional) Memo Item Amount of Disbursement this Page (optional) Amount of Disbursement this Page (optional) Memo Item Amount of Disbursement this Page (optional) Amount of Disbursement this Page (optional) Memo Item Amount of Disbursement this Page (optional) Amount of Disbursement this	Full Name (Last, First, Middle Initial)			Date of Disbursement		
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substruct: Memo Item	Mailing Address			M M / D D / Y Y Y Y		
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substruct: Memo Item 4000.00	City	State Zip Code		FEC Identification Number		
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substruct: Memo Item 4000.00	Purpose of Disbursement			С		
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Category/			Amount of Each Disbursement this Period		
State: District: Other (specify) ▼ Memo Item SUBTOTAL of Disbursements This Page (optional)	Office Sought: House Disburser	ment For:	Турс			
State: District: Wellio Item SUBTOTAL of Disbursements This Page (optional)		-				
4000 00		Offier (specify) ▼		Memo Item		
4000.00				4000.00		
				4000.00		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 22 OF 24 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
AMERICAN WORKING FAMILIES				C C00511915			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y			
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination			
Jackson Group Media, LLC				07			
Mailing Address 206 North Washington Street			Amo	ount			
Suite 10	0	7: 0 1	— г	04500.00			
City	State	Zip Code	L	21500.00			
Alexandria	VA	22314	Date	nsaction ID : SE.4747 e of Disbursement or Obligation			
Purpose of Expenditure Media Production/Spot Delivery		Category/ Type		07			
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 01			
MORSE, ALEX, , ,		X Oppose		ident Senate State: MA			
Calendar Year-To-Date			Disbursem	ent For: 🗶 Primary General			
Per Election for Office Sought	7 7	121500.00	2020	Other (specify) ▶			
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination			
Jackson Group Media, LLC				M M / D D / Y Y Y Y			
Mailing Address 206 North Washington Street				08 11 2020			
Suite 10			Amo	punt			
City	State	Zip Code		2450.00			
Alexandria	VA	22314		insaction ID : SE.4761 e of Disbursement or Obligation			
Purpose of Expenditure		Category/		M M / D D / Y Y Y			
Media Production/Spot Delivery		Туре	_ _	08 11 2020			
Name of Federal Candidate:		Support	Office Sou	ght: Nouse District: 01			
MORSE, ALEX, , ,		x Oppose	Pres	ident Senate State: MA			
Calendar Year-To-Date		192050.00	Disbursem	ent For: 🗶 Primary General			
Per Election for Office Sought		183950.00	2020	Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures			• • []	23950.00			
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •				
(c) TOTAL Independent Expenditures			· ▶ ∟				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized						
Jackson, Bud, , ,	Electronically Fil	ed1 -	M = M	/ D D / Y Y Y Y Y			
Signature	swoung I'u	Date	9 08	20 2020			

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITU	IRES			PAGE 23 OF 24
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
AMERICAN WORKING FAMILIE	S			FEC IDENTIFICATION NUMBER ▼
				C C00511915
Check if 24-hour report 48-hour report	rt New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee Targeted Platform Media		☐ Memo	Item [Date of Public Distribution/Dissemination
Mailing Address PO Box 237				07 28 2020 Amount
O'h.	Ctata	7:- Oodo		100000 00
City	State	Zip Code		100000.00
Crownsville	MD	20132	I	Transaction ID : SE.4749 Date of Disbursement or Obligation
Purpose of Expenditure TV Advertising		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office :	Sought: House District: 01
MORSE, ALEX, , ,		Coppose Support		President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		100000.00	Disburs 2020	sement For:
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
Targeted Platform Media				M M / D D / Y Y Y Y
Mailing Address DO Pay 237				08 03 2020
PO Box 237			,	Amount
City	State	Zip Code	_	50000.00
Crownsville	MD	20132		Transaction ID : SE.4754 Date of Disbursement or Obligation
Purpose of Expenditure TV Advertising		Category/ Type		08 / 03 / 2020
Name of Federal Candidate:		Support	Office S	Sought:
MORSE, ALEX, , ,		X Oppose	F	President Senate State: MA
Calendar Year-To-Date			Disburs	sement For: 🗶 Primary General
Per Election for Office Sought		171500.00	2020	Other (specify)
				Other (specify) >
(a) SUBTOTAL of Itemized Independent Expen	ditures		•	150000.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures		• [
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	candidate or authorized			
Jackson, Bud, , ,	[Electronically Fil	<i>led]</i> Date	e 08	M / D D / Y Y Y Y Y Y 2020
Signaturo		_	, <u> </u>	

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 24 OF 24
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
AMERICAN WORKING FAMILIES				
				C C00511915
Check if 24-hour report 48-hour report	New rep	ort Amends repo	t filed on	M / D D / Y Y Y Y
Full Name of Payee Targeted Platform Media		☐ Memo I	М	f Public Distribution/Dissemination
Mailing Address PO Box 237			_ L	08 03 2020
F O BOX 237			Amoun	t
City	State	Zip Code		10000.00
Crownsville	MD	20132		action ID : SE.4758
Purpose of Expenditure TV Advertising		Category/ Type	М	f Disbursement or Obligation 08 03 2020
Name of Federal Candidate:		Support	Office Sought	t: X House District: 01
MORSE, ALEX, , ,		Coppose Oppose	Preside	NAA
Calendar Year-To-Date			Disbursement	
Per Election for Office Sought	7-1-1-7-	181500.00	2020	ther (specify)
Full Name of Payee Targeted Platform Media		☐ Memo	tem Date o	f Public Distribution/Dissemination
Mailing Address PO Box 237			Amoun	ıt.
City	State	Zip Code		127500.00
Crownsville	MD	20132	Trans	action ID : SE.4762 f Disbursement or Obligation
Purpose of Expenditure TV Advertising		Category/ Type	M	08 11 2020
Name of Federal Candidate:		Support	Office Sought	t: X House District: 01
MORSE, ALEX, , ,		M Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	311450.00	Disbursement 2020	For: x Primary General
				(opcony) P
(a) SUBTOTAL of Itemized Independent Expenditures			•	137500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	311450.00
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Jackson, Bud, , ,	Electronically Fil	led] Date	M = M /	20 / 2020